BetsyAnn Wrask, Clerk Nigel Hicks-Tibbles, First Assistant Clerk Alona Tate, Second Assistant Clerk Theresa Utton-Jerman, Journal Clerk Chris Ditmeyer, Clerk Associate



House of Representatives State House Montpelier, VT 05633-5501 Tel: (802) 828-2247 House Staff@leg.state.vt.us

VERMONT HOUSE OF REPRESENTATIVES

OFFICE OF THE CLERK OF THE HOUSE

House of Representatives	Disclosure 1	Form	
House Rule 90(b	o)(1)(C)		
Name: Wayne A. Laroche			
I serve on, or am a member of, the following boar	ds, commis	sions, or similar enti	ties that
are regulated by law or that receive funding from	the State:		
	Remuneration		
Board, Commission, or Similar Entity Name	No	Yes	Yes
and Position (e.g. Member or Chair)		Only Expenses e.g. mileage	
Hone			
My Employer: Retive & (Salary disclosure not required)	_		
(Salary disclosure not required)			
1/			
Signed this 4 day of Anuary, 2023			
Printed Name (please sign on back))		
1) a viena A / av	00/12	9	
Printed Name (please sign on back) Wayne A. Lat	- 0,16		